2000 UNIFORM BUSINESS REPORT (UBR)

FILED May 10, 2000 8:00 am Secretary of State **DOCUMENT # H68327** 1. Entity Name FLORIDA'S SMOKE & SNUFF II, INC. 05-10-2000 90014 001 ***600.00 Mailing Address Principal Place of Business 14077 63RD WAY 14077 63RD WAY CLEARWATER FL 33760 CLEARWATER FL 33760-3619 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-2572353 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name GORMIN, GARY P. Street Address (P.O. Box Number is Not Acceptable) 14077 63RD WAY **CLEARWATER FL 33760** Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change : TITLE **≥** Delete TITLE ELANE R. GORHIN 14077 63 rd WAY NO. FOURES, MARY ANN MAME NAME STREET ADDRESS STREET ADDRESS 14077 63RD WAY CLEARWATER, FL. 33760 CITY-ST-ZIP CITY-ST-ZIP **CLEARWATER FL 34620** Change ☐ Addition Delete TITLE TITLE GARY P. GORMIN GORMIN, GARY P. NAME NAME 14077 63Rd WAYNO. STREET ADDRESS STREET ADDRESS 14077 63RD WAY CLEARWATER FL. 33760 CITY-ST-ZIP CITY-ST-ZIP **CLEARWATER FL 34620** X Delete TITLE Change Addition TITLE JONATHAN GORMIN 14077 63 Rd WAY NO. NAME GORMIN, RUTH L. NAME STREET ADDRESS STREET ADDRESS 14077 63RD WAY CLEARWATER CITY-ST-ZIP CITY-ST-ZIP **CLEARWATER FL 34620** ☐ Delete TITLE Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IF ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY, ST. 7IP CITY-ST-ZIP Change Addition Delete TITLE

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee employeed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

(GORHIN) 4-24-2000